

APPLICATION FOR SWIMMING POOL OPERATION PERMIT

POOL INFORMATION:

Name of public swimming pool: _____

Street address of pool location: _____

City: _____ County: _____

Type of public swimming pool (*check one*)

- ☐ Swimming pool
- ☐ Wading pool
- ☐ Spa
- ☐ Other (*describe*) _____

date constructed or remodeled: (*check one*)

- ☐ Before May 1, 1993
- ☐ May 1, 1993 or later

Dates of operation: opening date _____ Closing date _____

Hours of operation: opening time _____ Closing time _____

OWNER INFORMATION:

Name of owner: _____

Mailing address: _____

Contact person: _____ Telephone: _____

OPERATOR (On-Site Manager) INFORMATION:

Name of pool operator: _____

Address: _____

Telephone number: _____

Pool operator trained by: (*check one*)

- ☐ National Swimming Pool Foundation
(Certificate Number: _____)
- ☐ Other (please specify) _____

APPLICATION SUBMITTED BY:

Owner or operator: _____
Signature *Typed or printed name*

Date: _____

INSTRUCTIONS

- Purpose** General Statute 130A-282 requires the Commission for Health Services to adopt rules governing public swimming pools. The rules in 15A NCAC 18A.2500 require the owner or operator to apply annually for an operation permit for each public swimming pool. This form is to allow owners or operators of public swimming pools to apply for permits
- Preparation:** The information requested on this form is to be completed by the pool owner or a designated representative of the owner. **The completed application is submitted to the local health department for the county in which the public swimming pool is located.** A separate application must be completed for each public swimming pool.
- Copies:** Original to be maintained at the local health department.
- Disposition:** This form may be destroyed in accordance with Standard 7 Inspection Records of the *Records Disposition Schedule* published by the N.C. Division of Archives and History.
- Reorder:** Additional Forms may be ordered from: Environmental Health Services Section
Department of Environment and Natural Resources
P.O. Box 29534
Raleigh, NC 27626-0534
(Courier 52-01-00)